Before the Federal Communications Commission Washington, D.C. 20554

))))
In the Matter of))) FCC Docket No. <u>RM-11306</u>)
Amendment of Part 97 of the Commission's Rules Governing the Amateur Radio Service Concerning Permitted Emissions and Control Requirements))))))))
By W. Lee McVey W6EM PG-12-19879))))
To: The Chief, Wireless Telecommunications Bureau	,

REPLY TO THE COMMENTS OF EDWIN JONES, M.D., AE4TM

The following is my reply, submitted in accordance with 47CFR§1.405(b).

The commenter, who is a medical doctor, claims in his filed comments that the Internet forum, QRZ.COM, somehow instilled the thought of filing irrational, emotion-based comments in the minds of many amateur operators. And, subsequently, after reading the forum content, numerous comments

were filed in opposition to the above two rulemakings. Quite an effort to attempt the discredit the validity of many filed comments.

While in this instance, Dr. Jones may not have officially provided a diagnosis of a mental illness, it appears that the display of free speech and subsequent lawful acts by United States citizens did invoke his consternation. Yes, it was troublesome free speech that was the derivative product of logical thought, rationale and data. A product that supports and reflects the thoughts of many, not an *ad-hoc* group of three. And, more than that, the encouragement to all those reading the postings to avail themselves of the Commission's comment filing system. If Dr. Jones was so concerned about the Internet's efficiency and expediency for comment filing purposes, why didn't he set an example by using the cumbersome paper filing method instead for his own comments?

Dr. Jones, whose amateur callsign is AE4TM, is himself a frequent poster to, and user of, the Internet forum QRZ.COM. For instance, on one occasion, Dr. Jones posted a claim on QRZ.COM that he had used his own Pactor-III Winlink 2000 system to provide life saving information via ham radio. Dr. Jones is a frequent backpacker and hiker and apparently carries along equipment with him on his extended stays away from the office. In the practice of medicine, life saving information may include advice in a

communication to a patient to take his or her medicine at the prescribed times and dosages; or advice or direction to a colleague or subordinate.

Patient-provider communications, I am led to believe, are required by law to be kept privileged and confidential. Perhaps this is why Dr. Jones is so fond of the almost-clandestine, Pactor-III mode.

While I do not wish to officially complain that Dr. Jones used amateur radio in conjunction with his present or former business activities, it should serve as an example that permitted use of proprietary protocols such as Pactor II and III make the monitoring and decoding of digital communications content difficult. Unless, of course, expensive, proprietary boxes are purchased. And, what is difficult to monitor provides an *incentivized* platform with which to conduct clandestine or cloaked activities that may otherwise be prohibited or unlawful. The Commission should not allow the use of such protocols in the Amateur Radio Service unless they are published in their entirety in internationally recognized technical journals and provided to the Commission for its review and approval prior to permitted use.

Whether or not one agrees with the basis for the National Security Agency's recent monitoring activities, it would certainly be an oversight for them to not examine carefully any radio communications that use methods designed to obscure, restrict, or otherwise *parochialize* the monitoring of their content.

/s/

W. Lee McVey W6EM PG-12-19879 3 Squires Glenn Lane Leeds, AL. 35094-4564 7 February 2006